

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

PLAINTIFF <i>Steven M. Johnson</i>		COURT CASE NUMBER <i>04-12086-WGY</i>
DEFENDANT <i>DAVID Mahoney IPS</i>		TYPE OF PROCESS <i>Civil</i>
SERVE ➡  AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <i>DAVID Mahoney Norfolk Correctional Institution</i>	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <i>P.O. Box 43 Norfolk MA</i>	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:  <i>Steven M. Johnson 158405 1300 Mc Miller Hwy Cumberland MD 21502-5622</i>		Number of process to be served with this Form - 285 <i>106</i> Number of parties to be served in this case <i>2</i> Check for service on U.S.A. <input checked="" type="checkbox"/>

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Signature of Attorney or other Originator requesting service on behalf of:

☐ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

DATE

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process <i>1</i>	District of Origin No. <i>37</i>	District to Serve No. <i>38</i>	Signature of Authorized USMS Deputy or Clerk <i>Nancy Ingle</i>	Date <i>8/16/05</i>
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service	Time	am
		pm

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

*served by cert mail 9/1/05 at  
Please notice that the USA form is David  
and the Summons has the name Donald*

UNITED STATES DISTRICT COURT

District of

MASSACHUSETTS

STEVEN M. JOHNSON

Plaintiff

SUMMONS IN A CIVIL CASE

V.

SUPERINTENDENT LUIS SPENCER,  
ET AL.,

Defendants

CASE

C.A. 04-12086-WGY

TO: (Name and address of Defendant)

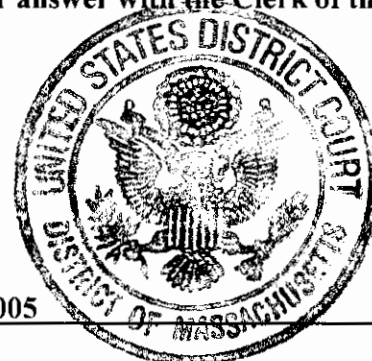
DONALD MAHONEY

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

STEVEN M. JOHNSON, PRO SE

\* or answer as otherwise required by the Federal Rules of Civil Procedure.

an answer to the complaint which is herewith served upon you, 20\* days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.



SARAH ALLISON THORNTON

CLERK

APRIL 6, 2005

DATE

(By) DEPUTY CLERK